

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

USPTO
Petitions
P.O. Box 1450
Alexandria, VA

22313-1450

**2. Article Number
(Transfer from service label)**

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

8-21-09

I spoke to Steven Brantley &
he informed me that my
paperwork needed to be
forwarded.

Thank you.

Eloise A. Gonzales

2450 W. Glenrosa Ave. #15

Phoenix, AZ

85013

COMPLETE THIS SECTION ON DELIVERY**A. Sign**

X

ent
Idressee

BOX M

B. Received by (Printed Name)**C. Date of Delivery****D. Is delivery address different from item 1?**

If YES, enter delivery address below:

JUN 19 2009

USPTO MAIL CENTER

RECEIVED

AUG 31 2009

OFFICE OF PETITIONS

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

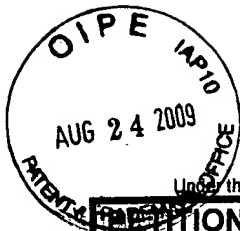
☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes



2009 AUG 26 PM 2:07

PTO/SB/65 (08-08)

Approved for use through 04/30/2009. OMB 0651-0016

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**PETITION TO ACCEPT UNAVOIDABLY DELAYED PAYMENT OF
MAINTENANCE FEE IN AN EXPIRED PATENT (37 CFR 1.378(b))**

Docket Number (Optional)

Mail to: Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450
Fax: (571) 273-8300

RECEIVED

AUG 31 2009

OFFICE OF PETITIONS

NOTE: If information or assistance is needed in completing this form, please contact Petitions Information at
(571) 272-3282.

Patent Number: 6,077,001Application Number: 29/128,504Issue Date: June 20, 2000Filing Date: Aug 3, 1998

CAUTION: Maintenance fee (and surcharge, if any) payment must correctly identify: (1) the patent number (or reissue patent number, if a reissue) and (2) the application number of the actual U.S. application (or reissue application) leading to issuance of that patent to ensure the fee(s) is/are associated with the correct patent. 37 CFR 1.366(c) and (d).

Also complete the following information, if applicable:

The above-identified patent:

- ☐ is a reissue of original Patent No. _____ original issue date _____;
original application number _____;
original filing date _____.
- ☐ resulted from the entry into the U.S. under 35 U.S.C. 371 of international application
_____ filed on _____.

CERTIFICATE OF MAILING OR TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is

(1) being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 OR

(2) transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (571) 273-8300.

6-11-09
Date

Elaine A. Gonzalez
Signature

Elaine A. Gonzalez
Typed or printed name of person signing Certificate

[Page 1 of 4]

This collection of information is required by 37 CFR 1.378(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 8 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

1. SMALL ENTITY

☒ Patentee claims, or has previously claimed, small entity status. See 37 CFR 1.27

2. LOSS OF ENTITLEMENT TO SMALL ENTITY STATUS

☐ Patentee is no longer entitled to small entity status. See 37 CFR 1.27(g)

3. MAINTENANCE FEE (37 CFR 1.20(e)-(g))

The appropriate maintenance fee must be submitted with this petition, unless it was paid earlier.

NOT Small Entity			Small Entity		
Amount	Fee	(Code)	Amount	Fee	(Code)
<input type="checkbox"/> \$ _____	3 ½ yr fee	(1551)	<input type="checkbox"/> \$ _____	3 ½ yr fee	(2551)
<input type="checkbox"/> \$ _____	7 ½ yr fee	(1552)	<input type="checkbox"/> \$ _____	7 ½ yr fee	(2552)
<input type="checkbox"/> \$ _____	11 ½ yr fee	(1553)	<input type="checkbox"/> \$ _____	11 ½ yr fee	(2553)

MAINTENANCE FEE BEING SUBMITTED \$ _____

4. SURCHARGE

The surcharge required by 37 CFR 1.20(i)(1) of \$ _____ (Fee Code 1557) must be paid as a condition of accepting unavoidably delayed payment of the maintenance fee.

SURCHARGE FEE BEING SUBMITTED \$ _____

5. MANNER OF PAYMENT

- ☐ Enclosed is a check for the sum of \$ 1510.01
- ☐ Please charge Deposit Account No. _____ the sum of \$ _____
- ☐ Payment by credit card. Form PTO-2038 is attached.

6. AUTHORIZATION TO CHARGE ANY FEE DEFICIENCY

☐ The Director is hereby authorized to charge any maintenance fee, surcharge or petition fee deficiency to Deposit Account No. _____

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

7. OVERPAYMENT

As to any overpayment made, please

☐ Credit to Deposit Account No. _____

OR

☐ Send refund check

WARNING:

Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.

8. SHOWING

The enclosed statement will show that the delay in timely payment of the maintenance fee was unavoidable since reasonable care was taken to ensure that the maintenance fee would be paid timely and that this petition is being filed promptly after the patentee was notified of, or otherwise became aware of, the expiration of the patent. The statement must enumerate the steps taken to ensure timely payment of the maintenance fee, the date and the manner in which the patentee became aware of the expiration of the patent, and the steps taken to file the petition promptly.

9. PETITIONER(S) REQUESTS THAT THE DELAYED PAYMENT OF THE MAINTENANCE FEE BE ACCEPTED AND THE PATENT REINSTATED.

Eloise A. Gonzalez
Signature(s) of Petitioner(s)

6-11-09
Date

Eloise A. Gonzalez
Typed or printed name(s)

Registration Number, if applicable

480-619-9136
Address

480-619-9136
Telephone Number

Provo, UT 84601
Address

ENCLOSURES:

- ☐ Maintenance Fee Payment
☒ Statement why maintenance fee was not paid timely
☒ Surcharge under 37 CFR 1.20(i)(1) (fee for filing the maintenance fee petition)
☐ Other: _____

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

37 CFR 1.378(d) states: "Any petition under this section must be signed by an attorney or agent registered to practice before the Patent and Trademark Office, or by the patentee, the assignee, or other party in interest."

Elaine A. Hargreaves
Signature

6-11-07
Date

Elaine A. Hargreaves
Type or printed name

Registration Number, if applicable

STATEMENT

(In the space below, please provide the showing of unavoidable delay recited in paragraph 8 above.)

Statement is attached.

(Please attach additional sheets if additional space is needed)

RECEIVED

AUG 31 2009

OFFICE OF PETITIONS

June 17, 2009

To: USPTO

Fr: Eloise A. Gonzales

Re: Petition to Accept Unavoidably Delayed Payment of Maintenance Fees
for Patent #6,077,007

This memo is in regards to the conversation I had with an examiner in your office and the information at the USPTO website. When I accessed the website, there was an update to the information that I was given over the phone. Included in the updates on the website was a \$270 fee to petition the office for an unavoidably delayed maintenance fee. The examiner asked me to include a \$1240.00 maintenance fee. I have attached a check in the amount of \$1510.00.

In regards to the Unavoidably Delayed status I was unemployed for 7 months during 2008 and was unable to pay this fee. My unemployment insurance was denied by the state and I have included a statement to verify my status. My attempts to sell the rights to this patent were not successful.

Under no circumstance and at no time during the remaining months of 2008 and 2009 was I able to pay this fee as I remain unemployed today. My monthly bills run \$1600.00 per month and I had no income. The unavoidably delayed payment could not be satisfied until now. I would hope that this petition is accepted under these terms.

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Employment Administration
PO BOX 29225
PHOENIX AZ 85038-9225

RECEIVED

US-436 (06/07)

AUG 31 2009

OFFICE OF PETITIONS

FAX: (520)770-3357
FAX: (602)364-1211

Fax or return the forms to the address or fax number located on the left.

ELOISE A GONZALES
2450 W GLENROSA AVE UNIT 15
PHOENIX AZ 85015-4987

Date: 09/30/2008
Claim NBR: 0009967783

|||||

EMPLOYER

BENEFITS CANNOT BE PAID AT THIS TIME BECAUSE OF YOUR AVAILABILITY. ANSWER THE QUESTIONS BELOW IN DETAIL AND RETURN THIS FORM WITHIN 5 WORKING DAYS FROM THE DATE OF THIS NOTICE. FAILURE TO ANSWER EACH QUESTION MAY RESULT IN A DETERMINATION BEING ISSUED WITH THE AVAILABLE INFORMATION. FAILURE TO RETURN THIS FORM WITHIN 5 WORKING DAYS MAY RESULT IN A DELAY OR DENIAL OF BENEFITS.

NAME OF THE SCHOOL/TRAINING THAT YOU ARE ATTENDING?

TOTAL CREDIT HOURS?

WHAT PROGRAM ARE YOU PURSUING?

WHAT DATE DID CLASSES START?

WHAT DATE WILL CLASSES END?

WHAT DAYS OF THE WEEKS ARE YOU ATTENDING SCHOOL?

WHAT HOURS ARE YOU ATTENDING SCHOOL?

HAVE YOU WORKED FULL TIME AND ATTENDED SCHOOL FULL TIME AT THE SAME TIME DURING THE PAST 9 MONTHS? IF YES, PROVIDE DATES.

IF YOU ARE OFFERED FULL TIME WORK THAT IS DURING SCHOOL HOURS, WHAT WOULD YOU DO?

WHAT IS YOUR NORMAL OCCUPATION?

ARE YOU SEEKING FULL TIME OR PART TIME WORK?

WHAT HOURS AND DAYS ARE YOU WILLING TO WORK?

IF ADDITIONAL SPACE IS NEEDED USE THE BOTTOM PORTION OF THIS FORM.

ELOISE A. GONZALES 2450 GLENROSA #15 PHOENIX, AZ 85015		91-2221 1221 756578704	329
DATE 6-17-09			
PAY TO THE ORDER OF USPTO		\$1,510.00	
One Thousand Five Hundred Ten & 00/100 DOLLARS			
CHASE			
JPMorgan Chase Bank, N.A. Phoenix, Arizona 85073 www.Chase.com			
MEMO 6077.007		Eloise A. Gonzales	



See reverse side